### COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR C-I-P)

As a below named inventor, I hereby declare th	As .	a below	named	inventor.	1	hereby	declare	th
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TYPE OF DECLARATION
This declaration is of the following type: (check one applicable item below)
original ·
☐ design
☐ supplemental
NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application, do not check next item; check appropriate one of last three items.
☐ national stage of PCT
NOTE: If one of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR C-I-P.
☐ divisional
☐ continuation
☐ continuation-in-part (C-I-P)
INVENTORSHIP IDENTIFICATION
the ownership of all the claims at the time the last claimed invention was made, should be submitted.  My residence, post office address and citizenship are as stated below next to my name, believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:
TITLE OF INVENTION
DEVICE FOR PERSONAL COMMUNICATIONS, DATA COLLECTION AND DATA PROCESSING
AND A CIRCUIT CARD SPECIFICATION IDENTIFICATION
ne specification of which: (complete (a), (b) or (c))
(a)  is attached hereto.
(b) ☒X was filed on05/18/95 as ☒X Serial No. 0 8/ 444,224 or ☐ Express Mail No., as Serial No. not yet known
and was amended on (if applicable).
(Declaration and Power of Attorney [1-1]—page 1 of 5)

NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67.
(c) was described and claimed in PCT International Application No.
amended under PCT Article 19 on (if any).
ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.
I acknowledge the duty to disclose information
which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56
(also check the following items, if desired)
and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent, and
In compliance with this duty there is attached an information disclosure statement in accordance with 37 CFR 1.98.
PRIORITY CLAIM (35 U.S.C. § 119)
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.
(complete (d) or (e))
(d) no such applications have been filed.
(e) 📆 such applications have been filed as follows.
NOTE: Where item (c) is entered above and the International Application which designated the U.S. itself claimed priority check item (e), enter the details below and make the priority claim.

(Declaration and Power of Attorney [1-1]—page 2 of 5)

# A. PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119

COUNTRY (OR INDICATE IF PCT)	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY UNDER 37	
Finland	942334	19 May 1994	<b></b>	ио □
			☐ YES	№ 🗆
			☐ YES	ио □
			☐ YES	ио 🗆
			☐ YES	ио 🗆

~~~	(6 MONTHS FO			ITHS

NOTE: If the application filed more than 12 months from the filing date of this application is a PCT filing forming the basis for this application entering the United States as (1) the national stage, or (2) a continuation, divisional, or continuation-in-part, then also complete ADDED PAGES TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR C-I-P APPLICATION for benefit of the prior U.S. or PCT application(s) under 35 U.S.C. § 120.

#### **POWER OF ATTORNEY**

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Clarence A. Green (24,622) Harry F. Smith (32,493) David N. Koffsky (19,905)

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

(Declaration and Power of Attorney [1-1]—page 3 of 5)

#### SEND CORRESPONDENCE TO

Clarence A. Green Perman & Green 425 Post Road Fairfield, CT 06430 DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Clarence A. Green 203-259-1800

#### DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

#### SIGNATURE(S)

NOTE: Carefully indicate the family (or last) name as it should appear on the filing receipt and all other, documents.

Full name of Kari-Pel	of sole or first i kka	nventor		WILSKA
(GIVEN NA		MIDDLE INITIAL OF	NAME)	FAMILY (OR LAST NAME)
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	ı			
Full name o Reijo	f second joint i			PAAJANEN
(GIVEN NA	11/	MIDDLE INSTIAL OR	NAME)	FAMILY (OR LAST NAME)
Date 11 A	ug. 1995	Country of	Citizenship <u>Fi</u>	nland
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(Declaration and Power of Attorney [1-1]-page 4 of 5)

Full name of third joint inve	entor, if any	TERHO
(GIVEN NAME)	MIDDLE INITIAL OR NAME)	
Inventor's signature ///	while about	FAMILY (OR LAST NAME)
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CHECK PROPER BOX(ES) F FORM	OR ANY OF THE FOLLOW	ING ADDED PAGE(S) WHICH
Signature for fourth	and subsequent joint inve	ntors. Number of pages added
	* * *	
<ul> <li>Signature by admining ceased or incapacital</li> </ul>	istrator(trix), executor(trix) of parties inventor. Number of parties	or legal representative for de-
•	• • •	,
☐ Signature for inventor authorized under 37	or who refuses to sign or of CFR 1.47. <i>Number of page</i>	cannot be reached by person as added
	• • •	
<ul> <li>Added page for signate where legal represent</li> </ul>	ture by one joint inventor on tative cannot be appointed	behalf of deceased inventor(s) in time (37 CFR 1.47).
	* * *	
<ul> <li>Added pages to communication, or continuation,</li> </ul>	bined declaration and pov	ver of attorney for divisional, cation.
	□ Number of page	ges added
	* * *	
☐ Authorization of attorne	ey(s) to accept and follow ins	tructions from representative.
	• • •	•
(If no further pages form this page and check th	e following item:)	hen end this Declaration with
	This declaration	ends with this page.

(Declaration and Power of Attorney [1-1]—page 5 of 5)

## ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR SIGNATURE BY FOURTH AND SUBSEQUENT INVENTORS

Full name of fourth joint	inventor, if any	
Jari		HAMALAINEN
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
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Inventor's signature		
_	Country of Citizenship	
Full name of sixth joint ir	nventor, if any	
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)
nventor's signature		
Date	Country of Citizenship	
Residence		
Post Office Address		